

County: Milwaukee
HONEY CREEK HEALTH AND REHAB CENTER
2730 WEST RAMSEY AVENUE

Facility ID: 7620

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MILWAUKEE 53221 Phone: (414) 282-2600

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 166

Total Licensed Bed Capacity (12/31/00): 196

Number of Residents on 12/31/00: 145

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Average Daily Census: 144

Corporation

Skilled

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		44.1
Home Health Care	No						1 - 4 Years		31.7
Supp. Home Care-Personal Care	No						More Than 4 Years		24.1
Supp. Home Care-Household Services	No		Developmental Disabilities	1.4	Under 65	2.8			
Day Services	No		Mental Illness (Org./Psy)	12.4	65 - 74	17.2			
Respite Care	No		Mental Illness (Other)	4.8	75 - 84	39.3			100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	33.8			
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.7	95 & Over	6.9			
Congregate Meals	No		Cancer	2.8					
Home Delivered Meals	No		Fractures	11.7		100.0			
Other Meals	No		Cardiovascular	14.5	65 & Over	97.2			
Transportation	No		Cerebrovascular	6.9					
Referral Service	No		Diabetes	2.1	Sex	%			
Other Services	No		Respiratory	6.2					
Provide Day Programming for Mentally Ill	No		Other Medical Conditions	36.6	Male	24.8			
Provide Day Programming for Developmentally Disabled	No			100.0	Female	75.2			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	4	3.3	\$113.94	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	4	2.8%
Skilled Care	11	100.0	\$229.38	111	90.2	\$98.13	0	0.0	\$0.00	11	100.0	\$164.00	0	0.0	\$0.00	133	91.7%
Intermediate	---	---	---	8	6.5	\$82.31	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	8	5.5%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	11	100.0		123	100.0		0	0.0		11	100.0		0	0.0		145	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%	One Or Two Staff		
Private Home/No Home Health	8.8	Daily Living (ADL)	Independent	80.0		145
Private Home/With Home Health	1.2	Bathing	0.7	77.9	19.3	145
Other Nursing Homes	9.9	Dressing	9.0	46.9	13.1	145
Acute Care Hospitals	77.8	Transferring	32.4	60.0	20.7	145
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	18.6	33.8	21.4	145
Rehabilitation Hospitals	0.0	Eating	55.9		10.3	145
Other Locations	2.3	*****				
Total Number of Admissions	171	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	1.4	Receiving Respiratory Care		6.9
Private Home/No Home Health	1.2	Occ/Freq. Incontinent of Bladder	52.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	26.5	Occ/Freq. Incontinent of Bowel	41.4	Receiving Suctioning		0.0
Other Nursing Homes	7.6			Receiving Ostomy Care		2.1
Acute Care Hospitals	8.2	Mobility		Receiving Tube Feeding		4.8
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	2.8	Receiving Mechanically Altered Diets		32.4
Rehabilitation Hospitals	0.0					
Other Locations	2.4	Skin Care		Other Resident Characteristics		
Deaths	54.1	With Pressure Sores	9.0	Have Advance Directives		80.0
Total Number of Discharges		With Rashes	5.5	Medications		
(Including Deaths)	170			Receiving Psychoactive Drugs		63.4

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	Proprietary			100- 199		Skilled		Facilities	
	This Facility %	Peer Group %	Ratio	Peer Group %	Ratio	Peer Group %	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	73.5	74.6	0.98	83.3	0.88	81.9	0.90	84.5	0.87
Current Residents from In-County	93.1	84.4	1.10	85.0	1.10	85.6	1.09	77.5	1.20
Admissions from In-County, Still Residing	32.7	20.4	1.61	19.2	1.70	23.4	1.40	21.5	1.52
Admissions/Average Daily Census	118.8	164.5	0.72	196.7	0.60	138.2	0.86	124.3	0.96
Discharges/Average Daily Census	118.1	165.9	0.71	194.3	0.61	139.8	0.84	126.1	0.94
Discharges To Private Residence/Average Daily Census	32.6	62.0	0.53	76.2	0.43	48.1	0.68	49.9	0.65
Residents Receiving Skilled Care	94.5	89.8	1.05	91.2	1.04	89.7	1.05	83.3	1.13
Residents Aged 65 and Older	97.2	87.9	1.11	93.9	1.04	92.1	1.06	87.7	1.11
Title 19 (Medicaid) Funded Residents	84.8	71.9	1.18	60.4	1.41	65.5	1.30	69.0	1.23
Private Pay Funded Residents	7.6	15.0	0.50	26.5	0.29	24.5	0.31	22.6	0.34
Developmentally Disabled Residents	1.4	1.3	1.04	0.6	2.20	0.9	1.55	7.6	0.18
Mentally Ill Residents	17.2	31.7	0.54	26.6	0.65	31.5	0.55	33.3	0.52
General Medical Service Residents	36.6	19.7	1.86	22.9	1.60	21.6	1.69	18.4	1.98
Impaired ADL (Mean)	47.0	50.9	0.92	48.7	0.97	50.5	0.93	49.4	0.95
Psychological Problems	63.4	52.0	1.22	50.4	1.26	49.2	1.29	50.1	1.27
Nursing Care Required (Mean)	7.6	7.5	1.01	7.3	1.04	7.0	1.08	7.2	1.06